<u>2SHB 1441</u> - H AMD **595**By Representative Clibborn

ADOPTED 04/21/2005

1 Strike everything after the enacting clause and insert the 2 following:

- 3 "NEW SECTION. Sec. 1. A new section is added to chapter 74.09 RCW 4 to read as follows:
 - (1) The legislature finds that:
 - (a) The health of the children of Washington state is critical to their success in school and throughout their lives. Children with health insurance coverage have better health outcomes than those who lack coverage. Children without health insurance coverage are more likely to be in poor health and more likely to delay receiving, or go without, needed health care services;
 - (b) Access to preventive and well-child health services for children is a cost-effective investment of both public and private dollars that improves the health of children and of our communities at large; and
 - (c) Health care coverage for children in Washington state is the product of critical efforts in both the private and public sectors to help children succeed. Private health insurance coverage is complemented by public programs that meet needs of low-income children whose parents are not offered health insurance coverage through their employer or who cannot otherwise afford the costs of coverage. In 2004, thirty-five percent of children in Washington state had some form of public health coverage. Yet, even with the efforts of both the private and public sectors, too many children in Washington state lack health insurance coverage. In 2004, almost one hundred thousand children were uninsured. Two-thirds of these children are low income.
 - (2) It is therefore the intent of the legislature that all children in the state of Washington have health care coverage by 2010. This should be accomplished by building upon and strengthening the successes of private health insurance coverage and publicly supported children's

- 1 health insurance programs in Washington state. Access to coverage
- 2 should be streamlined and efficient, with reductions in unnecessary
- 3 administrative costs and mechanisms to expeditiously link children with
- 4 a medical home.

- **Sec. 2.** RCW 74.09.415 and 2002 c 366 s 2 are each amended to read 6 as follows:
 - (1) There is hereby established a program to be known as the children's health program. The legislature finds that the children's health program is a more appropriate mechanism for providing health services to poor children who are not otherwise eligible for medical assistance than grants to community clinics to offset uncompensated care or coverage through the Washington basic health plan.

To the extent of available funds:

- (a) Health care services may be provided to persons who are under eighteen years of age with household incomes at or below the federal poverty level and <u>not otherwise</u> eligible for medical assistance or the limited casualty program for the medically needy.
- (b) The determination of eligibility of recipients for health care services shall be the responsibility of the department. ((The application process shall be easy to understand and, to the extent possible, applications shall be made available at local schools and other appropriate locations.)) The department shall make eligibility determinations within the time frames for establishing eligibility for children on medical assistance, as defined by RCW 74.09.510.
- (c) The amount, scope, and duration of health care services provided to eligible children under the children's health program shall be the same as that provided to children under medical assistance, as defined in RCW 74.09.520.
- (2) ((The legislature is interested in assessing the effectiveness of the prenatal care program. However, the legislature recognizes the cost and complexity associated with such assessment.
- The legislature accepts the effectiveness of prenatal and maternity care at improving birth outcomes when these services are received by eligible persons. Therefore, the legislature intends to focus scarce assessment resources to determine the extent to which support services such as child care, psychosocial and nutritional assessment and

counseling, case management, transportation, and other support services authorized by chapter 296, Laws of 1990, result in receipt of prenatal and maternity care by eligible persons.

The University of Washington shall conduct a study, based on a statistically significant statewide sampling of data, to evaluate the effectiveness of the maternity care access program set forth in RCW 74.09.760 through 74.09.820 based on the principles set forth in RCW 74.09.770.

The University of Washington shall develop a plan and budget for the study in consultation with the joint legislative audit and review committee. The joint legislative audit and review committee shall also monitor the progress of the study.

The department of social and health services shall make data and other information available as needed to the University of Washington as required to conduct this study.

The study shall determine:

- (a) The characteristics of women receiving services, including health risk factors;
- (b) The extent to which access to maternity care and support services have improved in this state as a result of this program;
- (c) The utilization of services and birth outcomes for women and infants served by this program by type of practitioner;
- (d) The extent to which birth outcomes for women receiving services under this program have improved in comparison to birth outcomes of nonmedicaid mothers;
- (e) The impact of increased medicaid reimbursement to physicians on $provider\ participation;$
- (f) The difference between costs for services provided under this program and medicaid reimbursement for the services;
- (g) The gaps in services, if any, that may still exist for women and their infants as defined by RCW 74.09.790 (1) and (4) served by this program, excluding pregnant substance abusers, and women covered by private health insurance; and
- (h) The number and mix of services provided to eligible women as defined by subsection (2)(g) of this section and the effect on birth outcomes as compared to nonmedicaid birth outcomes.)) Enrollment in the children's health program shall not result in expenditures that exceed the amount that has been appropriated for the program in the

- 1 operating budget. If it appears that continued enrollment will result
- 2 <u>in expenditures exceeding the appropriated level for a particular</u>
- 3 fiscal year, the department may freeze new enrollment in the program
- 4 <u>for that year.</u>
- 5 <u>NEW SECTION.</u> **Sec. 3.** This act is necessary for the immediate
- 6 preservation of the public peace, health, or safety, or support of the
- 7 state government and its existing public institutions, and takes effect
- 8 July 1, 2005."
- 9 Correct the title.

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